



**Prince William
Health District**

Strategic Plan

Fiscal Years 2014 - 2016

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AUTHORIZATION SIGNATURE PAGE

As Health Director of the Prince William Health District, I approve the Prince William Health District FY 2014-2016 Strategic Plan as presented in this document.

[Signature on File]

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7/1/13

Date

The Prince William Health District FY 2014 – 2016 Strategic Plan is acknowledged, adopted, and supported by the signature above.

Record of Revisions

Date	Content Changed	Changed By:
4/25/2014	<p>Background section: Edited population and land area figures; revised PWHD organizational description to be consistent with PWHD Performance Management Plan; and deleted reference to adult and child dental services.</p> <p>Goals 1.7 and 1.8 (and associated Objectives): Added footnote regarding statewide transition from clinical dental services to community based preventive programs.</p> <p>Goal 3.1: Edited language.</p> <p>Edited language of the following Objectives: 1.3.2, 1.8.3, 2.5.1, 3.1.1, 3.3.1, 3.3.2, 3.4.1, 4.1.1, 4.1.2, 4.1.3, 4.1.4, 4.3.1, 4.3.7, 4.3.8, 4.5.1, and 5.3.1.</p> <p>Revised baseline and/or target date for the following Objectives: 1.2.1, 1.3.1, 1.3.2, 1.8.3, 3.2.1, 3.3.2, 4.1.2, 4.1.3, 4.1.4, 5.1.1, and 5.3.1.</p> <p>Objective 1.3.3: Added as new objective (based on staff discussion during program-specific Performance Management meeting with Health Planner).</p> <p>Objective 5.1.2: Deleted as next comprehensive community-wide public health survey will not be conducted within the timeframe of the current PWHD Strategic Plan.</p> <p>Objective 5.1.3: Re-numbered to be Objective 5.1.2</p> <p>Objective 5.3.1: Deleted as its completion pre-dated effective date of PWHD Performance Management Plan.</p> <p>Objective 5.3.2: Re-numbered to be Objective 5.3.1.</p> <p>Appendix 5: Updated PWHD Organizational Chart.</p>	Karen Fujii

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Executive Summary

In this turbulent economic time, the field of public health must confront persisting and emerging population and environmental challenges in the face of diminishing public and private resources. In order to best focus efforts, measure outcomes and ensure high performance over the next several years, the Prince William Health District (PWHD) developed this Strategic Plan. This document outlines PWHD goals and objectives over the next three years. Moreover, it describes how the agency protects, promotes and encourages a healthy community and a healthy environment.

The PWHD Strategic Plan was initially envisioned by management staff from each division of the Health District and organized around the Ten Essential Public Health Services. Managers sought input from various staff members to incorporate employees' specialized knowledge base and perspectives. Because every staff member will be involved in the action steps required for implementing the Strategic Plan, employee engagement in this planning process was essential. The collaborative development of the Strategic Plan will allow the Health District to move forward in alignment with the findings of the Community Health Assessment, the direction of the Community Health Improvement Plan and the guidance of the Performance Management Plan.

In efforts to facilitate open and transparent communication regarding this document, the Strategic Planning Team also consulted the Virginia Department of Health's Strategic Plan and leadership to ensure that PWHD objectives corresponded with the state's goals and timelines. They reviewed assessments and reached out to external partners that could highlight significant trends or community health concerns. Through these sources, the Health District was able to effectively assess organizational strengths and weaknesses, incorporating them into the Strategic Plan's goals and objectives.

Based on PWHD efforts, five strategic priorities were identified:

- Priority Area #1: Improve the health of the community through prevention
- Priority Area #2: Strengthen community emergency preparedness and response
- Priority Area #3: Improve health equity and access to care
- Priority Area #4: Optimize performance of the organization
- Priority Area #5: Collaborate with local, state and national partners to address significant public health issues

The strategic priorities outlined in this plan will enhance PWHD's ability to identify goals and objectives focused on high-quality, high-performance public health services, guiding organizational decision-making. By focusing on the areas identified as priorities for the agency and by utilizing continuous quality improvement strategies, PWHD can be proactive in addressing health issues and concerns in the community.

Finally, as a performance-based organization, the Strategic Plan allows us to improve our effectiveness as public servants. We look forward to moving ahead with these priorities and continuing to build a community of healthy people and a healthy environment.

The Prince William Health District Strategic Plan can also be found on the Prince William Health District (PWHD) website (<http://www.vdh.virginia.gov/LHD/PrinceWilliam>).

Vision, Mission and Values

Vision: The Prince William Health District, a community of healthy people and a healthy environment.

Mission: The Prince William Health District is dedicated to promoting optimum wellness, preventing illness, responding to emergencies and protecting the environment and health of our residents.

By adopting philosophies of Leadership and Teamwork, we, the employees are committed to partnering with the community, state, and region to create a healthy environment and to encourage and assist the citizens in achieving optimal health for themselves and their families.

Values:

- **Accountability:** Every individual in this organization should be held accountable for his/her own actions, which reflect upon us all as a whole.
- **Customer Service:** We will listen to and assess the needs of our customers and respond to them in an effective and efficient manner. When change is required, we must be able to foster change and realize its benefits.
- **Excellence:** We will work together to create an environment that encourages creativity and initiative as well as empowers employees. We will learn to become self-directed and develop the ability to work with less supervision.
- **Flexibility:** We will learn to adapt our varying responsibilities in order to reach our goals.
- **Human Dignity of Staff:** We will recognize achievement and never miss an opportunity to commend an individual for a job well done. Advancement and reward will be based upon an individual developing new competency that will progress their team toward meeting PWHD's mission.
- **Openness:** There will be clear communication of PWHD goals and how an individual's performance supports these goals.
- **Stewardship:** We will all manage our resources responsibly to support PWHD's mission.
- **Teamwork:** We understand the value of shared resources and knowledge, and freely assist each other upward, downward, and across the organization.
- **Trust:** Through mutual support, we will demonstrate respect and commitment to the success of others, personal accountability, and a recognition that we all share responsibility for guiding the organization.

Leadership and Teamwork Philosophies

Leadership Philosophy

Purpose: We believe our employees want to do the best job in protecting our community's health by sharing the responsibility of creating a work environment with clear goals, mutual support and continuous learning. We will develop individual employee work profiles that support the organization's mission and define expected contributions. The Prince William Health District (PWHD) strategic priorities can be realized through teamwork, information sharing, support of individual creativity, and initiative to assume new tasks.

Expectations of all PWHD Personnel:

1. Act on values of respect, integrity, accountability, and a commitment to excellence.
2. Ensure the vision, mission, strategies, and goals of our organization are clearly articulated, understood and lived.
3. Support organizational decisions in a positive manner.
4. Encourage teamwork.
5. Encourage growth and development of a broader base of knowledge for all employees.
6. Identify and achieve Health District goals and objectives.
7. Communicate staff resource needs to management and manage those resources effectively.
8. Anticipate/meet the needs of our customers and provide courteous, effective service.
9. Protect the privacy of our customers and co-workers.
10. Provide resources for customers.

Expectations of Supervisors and Managers:

1. Establish a work environment that reflects the dignity and respect due all employees and that encourages all employees to make intelligent and responsible decisions, set and maintain priorities, identify creative alternatives, and take sensible risks.
2. Ensure technical, business and financial realities of PWHD are understood and used by staff to make decisions.
3. Actively communicate upwards, downwards, and across the organization.
4. Clearly communicate expectations to staff.
5. Look for ways to promote and implement practices and create new solutions.
6. Know Human Resource practices to benefit the employee and positively impact agency effectiveness.
7. Give individual feedback on employee performance, both positive and negative, during the evaluation cycle.
8. Coach, mentor and provide training to staff for improved performance.
9. Provide staff with opportunities to encourage professional growth within the Health District.

Expectations of Managers:

1. Manage funds judiciously and ensure staff/teams understand the financial aspects of business so that they can help.
2. Require a commitment to a sense of team and a consistency in approach to all employees.
3. Promote and implement the best standards of practice.

Teamwork Philosophy

Purpose: The success of protecting the community's health is dependent upon the success of each Prince William Health District (PWHD) employee. We believe our employees want to do the best job in protecting the community's health by sharing the responsibility to fulfill their intended role of improving organizational effectiveness as PWHD strives towards its vision. PWHD has a commitment to teamwork and an appreciation for the value its employees bring to the organization. Every employee is a leader. Every employee is expected to further develop leadership skills within their teams and the organization.

Expectations of Staff:

1. Share information, consult with each other, and work in teams to make the best decisions and produce the best results.
2. Maximize talents, skills and creativity in a group setting.
3. Recognize and adapt to team members' strengths and weaknesses.
4. Assist co-workers with workload in order to meet PWHD goals.
5. Work effectively with co-workers from all PWHD divisions.
6. Recognize team members' accomplishments and celebrate successes together.
7. Keep information flowing to all team members.
8. Welcome comments and ideas from all team members.

Expectations of Supervisors:

1. Communicate clearly that collaboration is expected; no person owns a work area or process alone.
2. Be open and receptive to ideas and input from others on the team.
3. Model teamwork in interactions with each other and the rest of the organization.
4. Recognize and reward teamwork and employee accomplishments.
5. Identify roles and set expectations for working in a team environment.
6. Recognize team members' strengths and provide opportunities for their success.
7. Encourage employees to give and receive feedback appropriately.
8. Facilitate communication among team members.
9. Promote a team atmosphere and collaboration.
10. Lead by example, provide guidance and offer clear direction.

Expectations of Managers:

1. Set direction for providing open, honest, and constructive feedback.
2. Promote brainstorming and encourage new ideas.
3. Create opportunities for cross-training and employee growth.
4. Openly communicate changes in goals and direction.
5. Recognize and reward teamwork and employee accomplishments.
6. Recognize employees' strengths and provide opportunities for their success.
7. Encourage employees to give and receive feedback appropriately.
8. Facilitate communication among team members.
9. Promote a team atmosphere and collaboration.
10. Lead by example, provide guidance and offer clear direction.

Background

The Prince William Health District (PWHD) is located in Northern Virginia, approximately 35 miles southwest of Washington, DC. The Health District is part of the National Capital Region, which includes counties and cities in the Washington, DC metropolitan area. PWHD encompasses a total area of 349 square miles and includes Prince William County and the independent cities of Manassas and Manassas Park. PWHD provides public health services to 454,096 residents with diverse cultural and ethnic backgrounds. According to 2010 US Census data, 58.1% of the Health District's population is White, 19.4% is African American, 7.4% is Asian, 0.6% is American Indian/Alaska Native, 0.1% is Native Hawaiian/Pacific Islander, 9.4% is of other races, and 5.0% is of two or more races. Approximately 21.6% of the population is of Hispanic or Latino origin (any race). Five-year estimates from the US Census Bureau's American Community Survey (2007-2011) indicate that in Prince William County, Manassas City, and Manassas Park City, 21.3%, 24.5%, and 31.0% of the population respectively are foreign-born and 29.8%, 34.4%, and 47.1% of the population respectively speak a language other than English at home. The median age for each jurisdiction is 33.4 years (Prince William County), 31.9 years (Manassas City), and 30.6 years (Manassas Park City).

The PWHD is comprised of four major divisions:

- **Business Office**
 - Accounts Payable
 - Accounts Receivable
 - Administrative Support
 - Budget
 - Human Resources
- **Community Health Division**
 - Clinical Activities
 - Oral Health¹
 - Women, Infants, and Children (WIC)
- **Environmental Health Division**
 - Consumer Services
 - Onsite Sewage and Water Services
- **Office of the Health Director**
 - Administrative Support
 - Emergency Preparedness and Response
 - Epidemiology
 - Health Planning

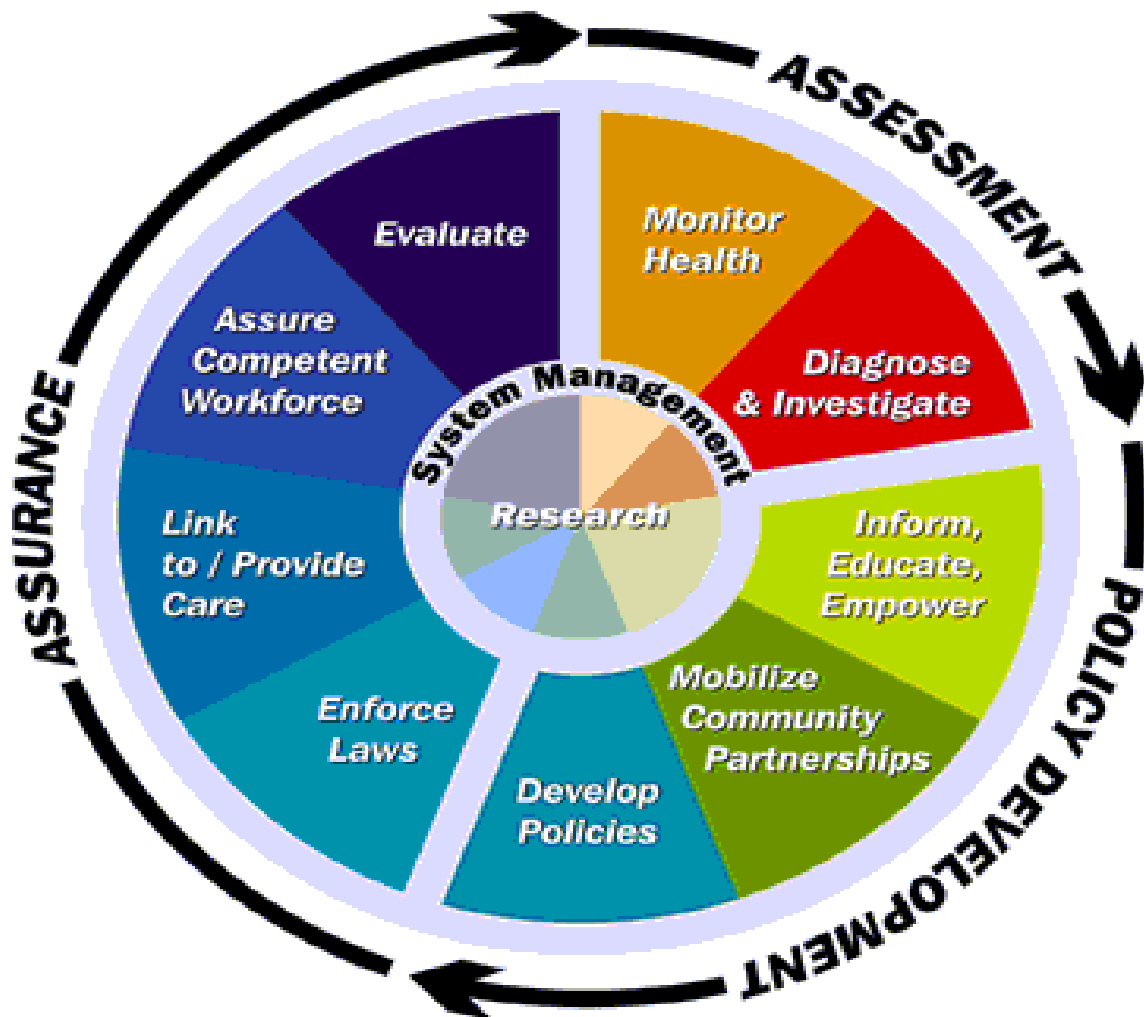
PWHD operates multiple programs to protect and improve the health and well-being of its residents. Services include: immunizations; family planning services; maternity care; nutritional education and food vouchers for eligible women, infants, and children; diagnosis, treatment, and counseling for sexually transmitted diseases; AIDS Drug Assistance Program; tuberculin testing and diagnostic chest x-rays; investigation of reportable diseases; environmental health services, including restaurant and pool inspections; emergency preparedness and response; and, processing of death certificates. Services are provided at six different locations in the Health District.

¹ Due to a statewide transition from clinical dental services to community based preventive programs, PWHD dental clinics have closed as of December 31, 2013.

PWHD historically has participated in the Prince William County strategic planning process as well as the Greater Prince William Community Needs Assessment process, which examines data to define Human Services accomplishments, resources and challenges. The Prince William County strategic planning process began in 1989 when the Board of County Supervisors appointed citizens to the County's Commission on the Future. In 1992, the Board of County Supervisors approved Prince William County's first strategic plan. This commission has grown in membership, and participates in the visioning process that covers nearly every aspect of the County's strategic planning process to answer the following question: "What do citizens want from their community and how do we get there?" While PWHD has contributed public health related data to both of these planning efforts, this is the first strategic plan designed to outline the specific priorities of the Health District alone.

In preparation for developing its 2014-2016 Strategic Plan, PWHD completed a comprehensive community health assessment in 2012-2013 using local data and a community-wide survey to gain perspective on the significant public health issues in the Greater Prince William Area. In collaboration with multiple agencies and stakeholders, the survey was disseminated to a wide range of health professionals, area experts and the general public. Results of the Community Health Assessment have allowed PWHD to align its strategic priorities with the greatest public health needs of the residents we serve, as well as determine the most effective strategies for collaborating with our partners.

Ten Essential Public Health Services



1. Monitor health status to identify and solve community health problems.
2. Diagnose and investigate health problems and health hazards in the community.
3. Inform, educate, and empower people about health issues.
4. Mobilize community partnerships and action to identify and solve health problems.
5. Develop policies and plans that support individual and community health efforts.
6. Enforce laws and regulations that protect health and ensure safety.
7. Link people to needed personal health services and assure the provision of health care when otherwise unavailable.
8. Assure competent public and personal health care workforce.
9. Evaluate effectiveness, accessibility, and quality of personal and population-based health services.
10. Research for new insights and innovative solutions to health problems.

Source: Centers for Disease Control and Prevention

Strategic Plan Methodology

To prepare for the development of the first Prince William Health District (PWHD) Strategic Plan, the Health Director performed a review of Strategic Plans from other organizations and agencies with similar components, including those from the Virginia Department of Health (VDH) and neighboring Health Districts. The basic outline and formatting of this Strategic Plan was based on the elements included in these documents, modified to fit the unique needs of PWHD and structured around the Ten Essential Public Health Services.

The Health Director began compiling data in order to establish a baseline that would allow the PWHD Strategic Planning Team to set appropriate goals and highlight priority areas. This effort focused on the data and statistics already routinely collected by the Health District at the program or division level, as this information not only offered insight into the long-term trends associated with PWHD services, but was also readily accessible. Sources included the internal VDH Dashboard website and the VDH Data Warehouse, among other local and state data tracking systems. These data sources had previously been shared with community partners for the Prince William County Budget document and the Greater Prince William Area Needs Assessment, but never assembled in this manner for internal use. In addition to gathering PWHD data, the Health Director reviewed a variety of nationally recognized external sources such as the County Health Rankings and Healthy People 2020 as a means for establishing reasonable benchmarks.

After collecting preliminary baseline data, the Health Director formed a Strategic Planning Team consisting of the Health Director, the Management Team and the Executive Assistant. In a series of monthly meetings from August 2011 through January 2013, the team worked to identify gaps and collect additional data. Over time, these meetings expanded to include discussions on strategic priorities and the realistic capacity of PWHD.

The Strategic Planning Team also made concerted effort to incorporate the feedback and perspectives of general staff in these early stages of development. During an all-staff meeting held in March 2012, Managers and Supervisors facilitated small group discussions on strengths and weaknesses of the Health District, as well as broad strategies for improvement.

In July 2012, the Strategic Planning Team was expanded to include Program Supervisors, Senior Public Health Nurses and the Health Planner/Accreditation Coordinator. The larger team was able to vet and discuss the document, create a more comprehensive draft and add current data from the Community Health Assessment. Decisions and new information were documented during each meeting and maintained by the Executive Assistant. Official processes for reviewing and modifying the Strategic Plan were established in August 2012 and implemented through regular meetings beginning in January 2013. A final version of the Strategic Plan for fiscal years 2014-2016 was adopted in July 2013. The Plan will be reviewed quarterly by the Strategic Planning Team, examined more thoroughly at the beginning of each Fiscal Year, and in January 2016, development of an updated strategic plan will begin.

The PWHD Strategic Plan will be made available on the Health District's website during the summer of 2013. PWHD welcomes the opportunity for input from local and state partners and will incorporate this feedback into the next PWHD Strategic Plan, as appropriate.

Strategic Plan Components

- **Strengths:** Internal resources, programs, assets and/or partners that allow the Health District to operate at high performance (e.g., highly trained staff, sufficient supplies, etc.).
- **Weaknesses:** Internal barriers or shortcomings that may prevent the Health District from providing consistent, high quality services (e.g., Human Resources challenges, communication between divisions, etc.).
- **Opportunities:** External prospects for improving, achieving or maintaining high performance, high-quality operations (e.g., grant funding, policy changes, new partners, etc.).
- **Challenges:** External factors that may affect the Health District's ability to be successful (e.g., funding, policy, politics).
- **Strategic Priorities:** Structured around the Ten Essential Public Health Services, these broad principles will guide performance management, organizational development and resource allocation decisions in 2014-2016.
- **Goals:** Broad and data-based statements developed by the Management Team to focus the Health District's operations and future direction.
- **Objectives:** Intended targets that the Health District will meet to achieve its goals. Objectives are Specific, Measurable, Achievable, Realistic, and Time-bound (SMART).

Strengths, Weaknesses, Opportunities, and Challenges

The Prince William Health District's Strategic Planning Team conducted a strengths, weaknesses, opportunities and challenges (SWOC) analysis to define the context in which the Health District is operating currently, as well as to identify environmental factors that may impact the Health District in the future. The analysis of the Health District's internal strengths and weaknesses and external opportunities and challenges contributed to the development of the strategic priorities, goals and objectives set forth in this Plan.

In some instances, elements included in the SWOC are cross-cutting as both strengths and weaknesses, or opportunities as well as challenges. The information gathered in the analysis will guide discussions about:

- Ways strengths can be maintained, enhanced, or leveraged;
- Ways to minimize weaknesses;
- Options for leveraging or taking advantage of opportunities; and
- Potential impacts of challenges and how strengths and opportunities can be used to offset or prepare for them.

The SWOC Diagram (Appendix 4) is organized according to the following major themes:

- **Strengths:**
 - Organizational Structure
 - Workforce/Professional Development
 - Technical/Tangible Resources
 - Organizational Values
 - Communication with the Public
 - Partnerships and Collaborations
- **Weaknesses:**
 - Organizational Structure
 - Workforce/Personnel Issues
 - Financial/Budget and Resource Restraints
 - Communication with the Public
 - Partnerships and Collaborations
- **Opportunities:**
 - Partnerships and Collaborations
 - Evolving Health Environment
 - Workforce Development
- **Challenges:**
 - Uncertainty in Evolving Health Environment (Political, Social and Economic)
 - Workforce/Personnel Issues
 - Interaction with the Public

Strategic Priority #1: Improve the Health of the Community through Prevention

Public health is meant to promote wellness among entire populations through community-based systems and a built environment that is conducive to healthier lifestyles. As the entire nation continues to battle poor birth outcomes as well as chronic and communicable diseases that may be preventable, public health agencies strive to encourage healthy behaviors and address the social determinants of health that contribute to morbidity and mortality trends.

Prevention in the Prince William Health District (PWHD) has been successful through efforts such as immunizations, general maternity care, prevention of unintended pregnancy, oral health, Women, Infants and Children nutrition, environmental sanitation and consumer services, communicable disease management and control, outbreak investigation, and the use of electronic disease surveillance methods. However, in facing this time of tightening resources and the re-formation of health care provision in our country, PWHD must strengthen its ability to efficiently and effectively offer preventive services. Each PWHD division provides programs and services that promote health at every age and stage of life.

Goals

- 1.1 Provide clinical care focused on preventive services and programs
- 1.2 Monitor the adolescent immunization rate within the Prince William Health District
- 1.3 Reduce the spread of Sexually Transmitted Infections (STIs) in the community
- 1.4 Reduce the risk of childhood obesity through services that enable healthy eating
- 1.5 Improve adherence to VDH disease reporting timelines of providers in Prince William Health District
- 1.6 Ensure timely assessment and implementation of public health control measures for communicable disease investigations
- 1.7 Provide preventive clinical oral health services to eligible Prince William Health District residents²
- 1.8 Promote utilization of preventive oral health care for children³
- 1.9 Provide inspections for food establishments in order to prevent food borne illness
- 1.10 Provide inspections for well and onsite sewage systems to ensure water safety

Goals and Objectives to Reach by 2016

Goal 1.1 Provide clinical care focused on preventive services and programs

- | | |
|-----------------|---|
| Objective 1.1.1 | Increase the female clients of reproductive age seen in various Health District clinics who have documented evidence of multivitamin with folic acid counseling from 6% to 30%. |
|-----------------|---|

² Due to a statewide transition from clinical dental services to community based preventive programs, Prince William Health District dental clinics have closed as of December 31, 2013.

³ Ibid.

Objective 1.1.2	Increase the women screened for breast and cervical cancer in Every Woman's Life program from 50 to 60 women.
Goal 1.2	Monitor the adolescent immunization rate within the Prince William Health District
Objective 1.2.1	Increase the 11-17 year old children who have received 1 dose of Tdap from 82% to 89%.
Goal 1.3	Reduce the spread of Sexually Transmitted Infections (STIs) in the community
Objective 1.3.1	Increase the clients (15-64 years old) who are screened for HIV in selected Health District clinics from 37.9% to 40%.
Objective 1.3.2	Reduce the percentage of Chlamydia diagnoses in the Prince William Health District that are defined as repeat from 10% to 9%.
Objective 1.3.3	Increase the number of STI educational efforts that are targeted to community health providers from 0 to 2 per year.
Goal 1.4	Reduce the risk of childhood obesity through services that enable healthy eating
Objective 1.4.1	Decrease the average number of 2-4 year old children enrolled in the WIC program with a BMI greater than or equal to the 95 th percentile from 304 to 248.
Objective 1.4.2	Decrease the monthly average percentage of participants who miss food instrument pick up from 6.7% to 4%.
Goal 1.5	Improve adherence to VDH disease reporting timelines of providers in Prince William Health District
Objective 1.5.1	Increase provider reporting of Salmonellosis, Shigellosis and Shiga toxin-producing Escherichia coli within 3 days of diagnosis from 60% to 70%.
Objective 1.5.2	Increase provider reporting of Acute Hepatitis A infection within 24 hours of diagnosis from 67% to 90%.
Goal 1.6	Ensure timely assessment and implementation of public health control measures for communicable disease investigations
Objective 1.6.1	Increase the reports on Salmonellosis, Shigellosis and Shiga toxin-producing Escherichia coli investigations for which risk status assessment and decision regarding need to implement public health control measures are completed within three days of report receipt by health department from 75% to 85%.

Objective 1.6.2	Maintain reports on Acute Hepatitis A investigations for which risk status assessment and decision regarding need to implement public health control measures are completed within seven days of report receipt by health department at 100%.
Objective 1.6.3	Maintain the reported clusters/outbreaks in which a response is initiated and public health recommendations are provided within 24 hours of report at 100%.
Goal 1.7	Provide preventive clinical oral health services to eligible Prince William Health District residents⁴
Objective 1.7.1	Increase the Medicaid recipients in Prince William County with at least 1 sealed molar from 10% to 15%.
Objective 1.7.2	Increase the Medicaid recipients in Manassas City with at least 1 sealed molar from 13% to 15%.
Objective 1.7.3	Increase the adults in the Prince William Health District utilizing preventive services from 86% to 90%.
Goal 1.8	Promote utilization of preventive oral health care for children⁵
Objective 1.8.1	Increase the Medicaid-recipient children in Prince William County utilizing preventive dental services from 51% to 54%.
Objective 1.8.2	Increase the Medicaid-recipient children in Manassas City utilizing preventive dental services from 58% to 61%.
Objective 1.8.3	Increase the PWHD sites that provide education and fluoride varnish to WIC eligible infants and young children from 0 to 2.
Goal 1.9	Provide inspections for food establishments in order to prevent food borne illness
Objective 1.9.1	Increase inspections completed each year per Full Time Employee from 360 to 480.
Objective 1.9.2	Maintain the food establishments without founded food borne illness complaints in Manassas Park City at 95%.
Objective 1.9.3	Maintain the food establishments without founded food borne illness complaints in Manassas City at 95%.

⁴ Due to a statewide transition from clinical dental services to community based preventive programs, Prince William Health District dental clinics have closed as of December 31, 2013.

⁵ Ibid.

Objective 1.9.4 Maintain the food establishments without founded food borne illness complaints in Prince William County at 95%.

Goal 1.10 Provide inspections for well and onsite sewage systems to ensure water safety

Objective 1.10.1 Maintain the septic tank owners in compliance with the Chesapeake Bay Act at 75%.

Strategic Priority #2: Strengthen Community Emergency Preparedness and Response

In light of climate change and general concern for public safety, preparedness is a growing focus of public health. Rapid mitigation of public health emergencies – whether man-made or natural events – can be accomplished through pre-event planning, community collaboration, and education. A significant part of pre-event planning requires community-wide exercises and response enhancement through lessons learned.

The Emergency Preparedness and Response Program (EP&R) works to enhance the Health District's ability to respond to all hazards, including bioterrorism, infectious disease outbreaks and other public health emergencies. EP&R maintains close relationships with governmental and non-governmental organizations at the local, regional and state levels to fulfill its mission. The EP&R Program also manages the Greater Prince William Medical Reserve Corps (MRC), a team of medical and non-medical volunteers who train to augment PWHD during emergencies and public health events.

Goals

- 2.1 Increase the emergency preparedness of Greater Prince William Area residents
- 2.2 Maintain adequate resources to respond to an emergency
- 2.3 Improve communication to the public during emergency events
- 2.4 Build the capacity of the Medical Reserve Corps to assist in emergencies
- 2.5 Ensure the ability of the Prince William Health District to adequately respond to emergencies

Goals and Objectives to Reach by 2016

Goal 2.1 Increase the emergency preparedness of Greater Prince William Area residents

- Objective 2.1.1 Increase the community events in which Emergency Preparedness education is provided each year from 10 to 18.

Goal 2.2 Maintain adequate resources to respond to an emergency

- Objective 2.2.1 Maintain inventory accuracy at 80%.

Goal 2.3 Improve communication to the public during emergency events

- Objective 2.3.1 Increase the emergency events in which risk communication policies are implemented from baseline to 100%.
- Objective 2.3.2 Increase the trained and designated local Public Information Officers (PIOs) from 0 to 2.

Goal 2.4 Build the capacity of the Medical Reserve Corps (MRC) to assist in emergencies

- Objective 2.4.1 Increase new MRC Volunteers from 530 by 10% annually.

- Objective 2.4.2 Maintain the MRC Volunteer Orientations held each year at 12.
- Objective 2.4.3 Increase the MRC Volunteers that participate in emergency preparedness trainings, drills and exercises from 14% to 25%.
- Objective 2.4.4 Increase the MRC Volunteers that are trained and able to respond to emergencies from 65% to 75%.

Goal 2.5 Ensure the ability of the Prince William Health District to adequately respond to emergencies

- Objective 2.5.1 Increase the Emergency Response Exercises held each year from 1 to 2.
- Objective 2.5.2 Increase the PWHD staff that is NIMS/ICS compliant from 80% to 95%.
- Objective 2.5.3 Increase the senior and management staff that is trained in Advanced ICS (ICS 300/400) from 76% to 80%.
- Objective 2.5.4 Increase the safety inspections conducted each year in every PWHD building from 1 to 2.

Strategic Priority #3: Improve Health Equity and Access to Care

While the Prince William Health District (PWHD) acknowledges that many other factors contribute to general wellbeing, access to medical services is essential for assuring health equity. We can accomplish this by preventing and mitigating poor birth outcomes, chronic conditions and communicable diseases among underserved populations. Over the last several years, options for both prenatal care and primary care have increased for uninsured individuals in the local area, but often these services are cost prohibitive and there is limited access to specialty care. Uninsured residents often have to travel two hours or more in order to receive specialty or surgical care. For many PWHD clients, this is not possible. The GPWA Community Health Assessment demonstrated that, as a result, many residents use the emergency departments at the local and regional hospitals to receive care for routine and preventable health concerns. PWHD often operates as a safety net for these residents without other health care options, providing services that allow every person to achieve optimum wellness.

Goals

- 3.1 Increase understanding of potential impacts of Health Care Reform on the residents of Prince William Health District
- 3.2 Improve the health of babies born to Prince William Health District maternity clients
- 3.3 Assure access to and utilization of health care among underserved populations
- 3.4 Initiate programs focused on decreasing health disparities

Goals and Objectives to Reach by 2016

Goal 3.1 Increase understanding of potential impacts of Health Care Reform on the residents of Prince William Health District

- Objective 3.1.1 Increase the PWHD staff with enhanced understanding of the implementation of Health Care Reform and its effects on access to care for Health District residents from baseline by 25%.

Goal 3.2 Improve the health of babies born to Prince William Health District maternity clients

- Objective 3.2.1 Maintain low birth weight babies born to PWHD maternity patients at 6.5%.
- Objective 3.2.2 Increase the gestational diabetics within the PWHD client-base that are tested post-partum for overt diabetes from 80% to 98%.

Goal 3.3 Assure access to and utilization of health care among underserved populations

- Objective 3.3.1 Initiate targeted health initiatives within geographic/demographic areas of high need as defined by the PWHD.

Objective 3.3.2 Enhance educational efforts to community health care providers regarding adult immunization recommendations from an as-needed basis to monthly.

Objective 3.3.3 Decrease the PWHD denial rate of claims for family planning service reimbursements through the Plan First program from 42% to 35%.

Objective 3.3.4 Increase the average participants enrolled in the WIC Program from 7,667 to 8,876.

Goal 3.4 Initiate programs focused on decreasing health disparities

Objective 3.4.1 Increase the PWHD collaborations focusing on preventing outcome disparities between racial/ethnic groups affected by breast cancer from 0 to 1.

Strategic Priority #4: Optimize Performance of the Organization

The Prince William Health District (PWHD) is part of the local public health system striving to make the greatest impact on community well-being by identifying health issues and implementing actions that protect, promote and improve public health. As a means for ensuring that the Health District achieves optimum performance, practices clear communication with partners and stakeholders, provides client-centered services and is eligible for additional funding opportunities, PWHD is seeking National Public Health Department Accreditation. As a result, PWHD has developed a Quality Improvement Committee and process for encouraging staff to identify mechanisms for enhancing the performance of the organization. These new initiatives, in addition to increased opportunities for professional staff development, will allow PWHD to better serve the public and protect the health of residents.

Goals

- 4.1 Deliver community health services that are timely and culturally appropriate
- 4.2 Become a high-performance organization
- 4.3 Provide Health District-wide and division-specific training to ensure competent staff
- 4.4 Reduce the length of Environmental Health consumer complaint closure time
- 4.5 Ensure that Prince William Health District plans, procedures, policies and protocols are accurate and up-to-date
- 4.6 Adhere to financial administrative and reporting guidelines

Goals and Objectives to Reach by 2016

Goal 4.1 Deliver community health services that are timely and culturally appropriate

- | | |
|-----------------|---|
| Objective 4.1.1 | Increase the public health information materials that are reviewed for cultural and/or linguistic appropriateness from baseline to 12 per year. |
| Objective 4.1.2 | Maintain the percentage of customers reporting that they received the information or services they needed at 97%. |
| Objective 4.1.3 | Maintain the percentage of customers that reported that they were served in a timely manner at 90%. |
| Objective 4.1.4 | Maintain the percentage of customers reporting that the information or service received was understandable at 97%. |

Goal 4.2 Become a high-performance organization

- | | |
|-----------------|--|
| Objective 4.2.1 | Attain national Public Health Department Accreditation. |
| Objective 4.2.2 | Increase the PWHD Organizational Performance Management Plans developed and implemented from 0 to 1. |

Objective 4.2.3 Increase the Quality Improvement proposals incorporated into PWHD operations from 0 to 4.

Goal 4.3 Provide Health District-wide and division-specific training to ensure competent staff

Objective 4.3.1 Increase the employees who complete their required Statewide Employee Orientation Program training in VA TRAIN within 18 months from baseline to 100%.

Objective 4.3.2 Increase the safety trainings held each year for all PWHD employees from 0 to 1.

Objective 4.3.3 Increase the trainings facilitated for all PWHD employees by the Epi Response Team each year from 0 to 2.

Objective 4.3.4 Increase the in-house provided clinical trainings regarding emerging public health issues from 1 to 4 annually.

Objective 4.3.5 Maintain the Environmental Health Division staff training meetings held each year at 24.

Objective 4.3.6 Increase the Emergency Management trainings held each year for all PWHD employees from 0 to 3.

Objective 4.3.7 Increase PWHD compliance with Health Literacy Plan training targets from baseline to 100%.

Objective 4.3.8 Increase PWHD compliance with Quality Improvement Plan training targets from baseline to 100%.

Goal 4.4 Reduce the length of Environmental Health consumer complaint closure time

Objective 4.4.1 Increase the customers satisfied with environmental health consumer complaint closure time in Manassas Park from 95% to 98%.

Objective 4.4.2 Increase the customers satisfied with environmental health consumer complaint closure time in Manassas City from 95% to 97%.

Objective 4.4.3 Increase the customers satisfied with environmental health consumer complaint closure time in Prince William County from 75% to 85%.

Goal 4.5 Ensure that Prince William Health District plans, procedures, policies and protocols are accurate and up-to-date

Objective 4.5.1 Increase the percentage of PWHD plans reviewed and updated (when appropriate) according to scheduled review-cycle from baseline to 75%.

Goal 4.6 Adhere to financial administrative and reporting guidelines

Objective 4.6.1 Maintain compliance with Prompt Payment Act at 95%.

Objective 4.6.2 Maintain third party payer accounts receivable greater than 90 days
at less than 15%.

Strategic Priority #5: Collaborate with Local, State and National Partners to Address Significant Public Health Issues

The Prince William Health District (PWHD) capitalizes on the experience and expertise of local, state and national organizations in strengthening community leadership, building capacity, and activating change. Organizations that are adept at developing innovative, practical, and evidence-based strategies for building partnerships and implementing prevention and health promotion projects are more successful in sustaining healthy communities. In 2012, PWHD established an Outreach Committee in order to identify opportunities for outreach to the community and strengthen partnerships with stakeholders. PWHD currently collaborates with a wide spectrum of entities from various disciplines and jurisdictions in order to combine resources, align with similar wellness-oriented initiatives and more comprehensively serve Greater Prince William Area residents.

Goals

- 5.1 Improve communication between Prince William Health District and community members
- 5.2 Establish and maintain partnerships with community stakeholders
- 5.3 Engage local partners and community members in prioritizing and implementing a Community Health Improvement Plan (CHIP)

Goals and Objectives to Obtain by 2016

Goal 5.1 Improve communication between Prince William Health District and community members

- Objective 5.1.1 Increase client satisfaction survey responses from 878 by 10%.
- Objective 5.1.2 Increase the PWHD Marketing Plans developed and implemented from 0 to 1.

Goal 5.2 Establish and maintain partnerships with community stakeholders

- Objective 5.2.1 Increase PWHD participation in community outreach events each year from 12 to 18.
- Objective 5.2.2 Increase the agencies, with which PWHD actively partners to provide targeted STI and risk reduction information, from 0 to 3.
- Objective 5.2.3 Increase the community training events initiated by the PWHD Environmental Health division from 1 to 4.
- Objective 5.2.4 Maintain the Environmental Health-related community task forces, in which PWHD regularly participates, at 5.
- Objective 5.2.5 Increase the Emergency Response drills performed each year in collaboration with outside partners from 0 to 2.

Objective 5.2.6 Increase Health District involvement in community coalitions focused on chronic disease prevention and management from 1 to 2.

Goal 5.3 Engage local partners and community members in prioritizing and implementing a Community Health Improvement Plan (CHIP)

Objective 5.3.1 Facilitate at least one PWHD Town Hall meeting to inform partners and community members of and Community Health Improvement Plan progress.

Appendix 1 – Strategic Planning Team and Collaborators

Alison Ansher, MD, MPH
Health Director

Patrick Jones
Environmental Health Manager

Rodney Follin
Business Manager

Karen Fujii, MHS
Health Planner

Lynn Browder, DDS
Dental Manager

Andrea Young, MPH
Epidemiologist

Linda Woods, RN, MS
Nurse Manager

Patrick Ashley
Emergency Preparedness Coordinator

Deborah Tillman, BS, IBCLC
WIC Program Coordinator

Prince William Health District Community Members

Those who live, work, learn, and play in the Greater Prince William Area are the key constituents of the Health District. We require their support, cooperation, collaboration and feedback in order to pursue our mission.

The Virginia Department of Health (VDH)

The PWHD is a part of VDH and as such, all PWHD actions and initiatives are consistent with those of VDH. VDH – in partnership with the Health District and the local governing bodies – is also responsible for determining a portion of the available resources and setting priorities for each of its Health Districts.

Appendix 2 – Glossary

- **Baseline:** Established number used to show improvement or change.
- **Client:** A person or organization seeking services, support and/or information from Prince William Health District (PWHD) programs.
- **Community Health Assessment (CHA):** This document provides information for problem and asset identification, intervention implementation, and evaluation. The current CHA is based on a survey that collected residents' opinions on significant public health issues, a comprehensive environmental assessment using a CDC-developed data collection tool, and secondary data from recognized public health resources. Assessments are ongoing and the reports will be updated annually to help measure progress toward goals and objectives outlined in the Strategic Plan and the Community Health Improvement Plan.
- **Community Health Improvement Plan (CHIP):** An outline of strategies for addressing significant health issues that are identified by the CHA and developed through a collaborative process with various stakeholders.
- **Health Literacy Plan:** This document outlines an official plan that allows employees to build their understanding and use of linguistic and culturally competent care.
- **Performance Measures:** Valid and reliable quantitative data to assess performance.
- **Performance Management Plan:** This document contains concrete data-based action steps that explain how the PWHD will accomplish its goals and objectives. It is an internal document used to monitor progress and is aligned with the Strategic Plan.
- **Personnel:** All staff members of the PWHD, to include classified employees, wage employees, volunteers, contractors, assignees (including students), contractors and employees of local government who perform work for the Virginia Department of Health.
- **Quality Improvement (QI) Plan:** This document provides a formal, ongoing process by which the PWHD may evaluate the quality of services provided to internal and external clients. The QI Plan defines and facilitates a systematic approach to identify and pursue opportunities for improving services and resolving problems.
- **SMART Objective:** Statement that is Specific, Measurable, Achievable, Relevant and Time-bound.
- **Strategic Plan:** This document sets forth what an organization plans to achieve, how it will achieve it, and how it will know if it has achieved it. These broad goals will demonstrate how the PWHD will contribute to implementation of the CHIP.
- **WebVision:** Electronic database used to maintain patient files, client records, services provided, and various other operational information.

Acronyms

BRFSS – Behavioral Risk Factor Surveillance System
CDC – Centers for Disease Control and Prevention
FTE – Full Time Employee
GPWMRC – Greater Prince William Medical Reserve Corps
HAN – Health Alert Network
ICS – Incident Command System
LTAR – Local Technical Assistance Review
NACCHO – National Association of County & City Health Officials
PIO – Public Information Officer
PWHD – Prince William Health District
STI – Sexually Transmitted Infection
Tdap – Tetanus, Diphtheria and Pertussis (Vaccine)
VDH – Virginia Department of Health
VEDSS – Virginia Electronic Disease Surveillance System
VENIS – Virginia Environmental Inspection System
WIC – Women, Infants and Children

Appendix 3 - Common Data and Information Sources

These sources were used to develop appropriate benchmarks for goals and objectives, as well as to determine the structure of this Strategic Plan document. A more comprehensive list of specific data sources can be found in the PWHD Performance Management Plan.

General Resources

- Behavioral Risk Factor Surveillance System – <http://www.cdc.gov/brfss>
- Centers for Disease Control and Prevention – <http://www.cdc.gov>
- County Health Rankings – <http://www.countyhealthrankings.org>
- Greater Prince William Community Needs Assessment - <http://www.pwchs.org/reports.htm>
- Health & Human Services: Healthy People 2020 - <http://www.healthypeople.gov/2020/default.aspx>
- National Association of County & City Health Officials – <http://www.naccho.org>
- Prince William County Strategic Plan (2013 – 2016) – <http://www.pwcgov.org>
- Prince William Health District Health Check – <http://www.vdh.virginia.gov/LHD/PrinceWilliam>
- Public Health Accreditation Board – <http://www.phaboard.org>
- US Census Bureau – <http://www.census.gov>
- Virginia Department of Health Strategic Plan – <http://www.vdh.virginia.gov>

Internal Resources

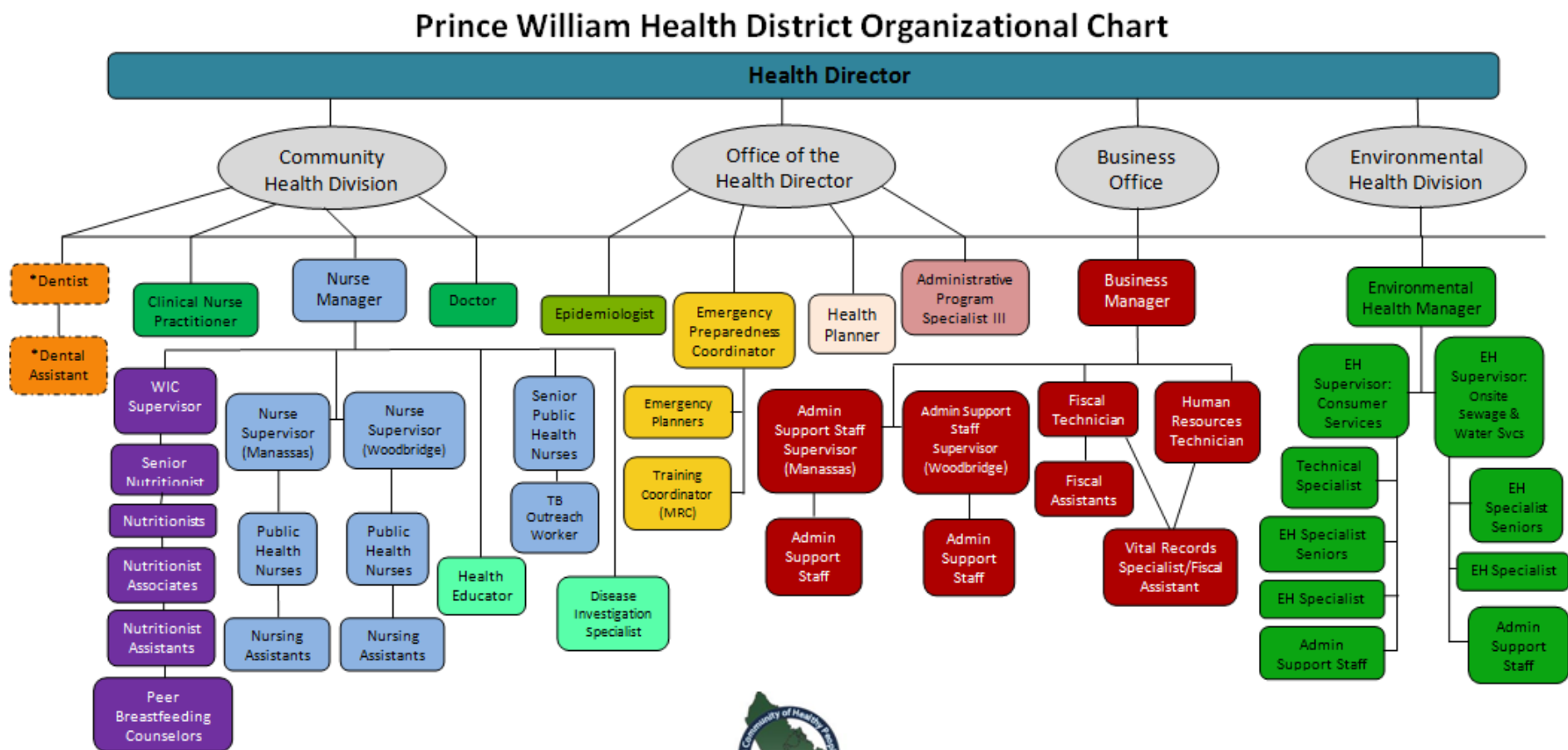
- Customer Feedback Surveys
- Prince William Health District Meeting Agenda and Minutes Documents
- Virginia Department of Health: Prince William Health District Dashboard Profile
- Virginia Environmental Inspection System
- Virginia Electronic Disease Surveillance System
- Virginia WIC Net Data
- WebVision

Appendix 4 – Strengths, Weaknesses, Opportunities & Challenges Diagram

Strengths	Weaknesses
<p>Organizational Structure</p> <ul style="list-style-type: none"> • Management team structure/ function • Resource management • Quality improvement plan and team • Recently revised emergency preparedness plan <p>Workforce/Professional Development</p> <ul style="list-style-type: none"> • Access to training opportunities • Access to employee development opportunities (e.g., formal CQI training) • Diverse areas of expertise and historical knowledge; culturally diverse staff • Cohesive workforce, with strong, educated, talented, dedicated, and experienced staff <p>Technical/Tangible Resources</p> <ul style="list-style-type: none"> • Access to operational resources • Multiple facilities • Electronic linkage to crisis communication • Surveillance systems <p>Organizational Values</p> <ul style="list-style-type: none"> • Adaptability • Entrepreneurialism • Client-focused care • Willingness to address new and emerging issues <p>Communication with the Public</p> <ul style="list-style-type: none"> • Community health assessments • Assurance of access to care for residents (e.g., Free Clinic) • Department credibility <p>Partnerships and Collaborations</p> <ul style="list-style-type: none"> • Access to non-profits and volunteers • Regional collaboration • Good relationships with many local and regional partners for assurance of access to care in the community • Access to knowledge resources through a statewide network of local Health Districts and central office 	<p>Organizational Structure</p> <ul style="list-style-type: none"> • Inflexible organizational structure; limited opportunities for advancement; workforce focused on historical public health roles • Standardization of processes and procedures • Performance management and quality improvement • Vulnerability to political climate and impact on long-term planning <p>Workforce/Personnel Issues</p> <ul style="list-style-type: none"> • Staff satisfaction • Inadequate staff growth to match population growth • Recent and expected retirements, resulting in loss of historic knowledge and new inexperienced staff in need of significant training <p>Financial/Budget and Resource Restraints</p> <ul style="list-style-type: none"> • Increased dependence on grant funding • Financial and personnel contracts compromising ability to sustain clinical programs compatible with standards of care • Resources for a culturally diverse population • Separate physical locations of some divisions (e.g., Onsite Sewage and Water Services located in the Development Services Building) • Insufficient state information technology support (i.e., technology costs, maintenance and training); outdated technology <p>Communication with the Public</p> <ul style="list-style-type: none"> • Use of social media/public health marketing to provide general public with information about services • Community/public visibility • Engagement of localities in the community health process <p>Partnerships and Collaborations</p> <ul style="list-style-type: none"> • Limited access to community health services in Western Prince William County • Relationship with private sector • Relationship with other County and State agencies • Inconsistent data collection

Opportunities	Challenges
<p><i>Partnerships and Collaborations</i></p> <ul style="list-style-type: none"> • Relationships with new hospitals and new hospital ownership • Partnerships with learning institutions (e.g., George Mason University) • Live Well! Coalition and related health promotion efforts • Relationships with non-profits and foundations in the community • Access to multi-jurisdictional resources; partnerships with other local health districts, county agencies, state agencies, private sector, etc. • Relationships with healthcare community to improve coordinated care • Improvements in relationships with County and State agencies • Experience and expertise to advise stakeholders on assurance of care • Involvement in professional organizations <p><i>Evolving Health Environment</i></p> <ul style="list-style-type: none"> • Health care reform • Recognition from health care and business leaders that data are crucial and prevention-focused interventions save money • Public Health Department Accreditation • Ability to provide positive health messaging through social media outlets (e.g., Facebook, Twitter and PWHD website) • Expansion of population-based services • Increasing diversity of Health District's population • Well-educated affluent population • Positive perception of PWHD by the community <p><i>Workforce Development</i></p> <ul style="list-style-type: none"> • Possibility of additional funding streams through new grants (e.g., hospital foundation grants) • Interns, Centers for Disease Control and Prevention workforce programs, and volunteers • Access to external training opportunities • Regional professional opportunities 	<p><i>Uncertainty in Evolving Health Environment (Political, Social and Economic)</i></p> <ul style="list-style-type: none"> • Implementation of the Affordable Care Act and the community/political understanding of its implications (e.g., funding, demand for services) • Public Health Department Accreditation (process, funding, implications, etc.) • Political and policy changes • Sequestration • State and local budget reductions • Reoccurrence of recession • Emerging public health concerns • Increased competition for funding sources among community partners • Unfunded mandates <p><i>Workforce/Personnel Issues</i></p> <ul style="list-style-type: none"> • Funding for local salary supplements resulting in staff turnover • Competition for skilled employees with other Health Districts • Workforce hiring process <p><i>Interaction with the Public</i></p> <ul style="list-style-type: none"> • Access to health care services in Health District • Provision of services to three separate localities with different regulations • Increasing diversity of the Health District's population and need for resources to accommodate this diversity

Appendix 5 - Prince William Health District Organizational Chart



*Due to a statewide transition from clinical dental services to community-based preventive programs, Prince William Health District dental clinics have closed as of December 31, 2013. However, there is potential for local funding to support a limited dental staff.



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